## STATE OF NEW HAMPSHIRE

## 2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

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| 211182  | PLEASE PRINT                                   |   |  | RECEIVED   |
|---|--|---|--|--|
| I. Name of Lobbyiste  | JAN 2 4 2019                                   |   |  |  |
| II. Name of lobbyist  | NEW HAMPSHIRE DEPARTMENT OF STATE              |   |  |  |
| Demers, Blais   | sdell & Prasol, Inc.                           |   |  |  |
| (Nai  | me of partnership, firm or o                   | corporation)                            |  |  |
| 72 North Main   | St. Ste 301                                    | Concord                                 | NH   | 03301  |
| Business Address: (St   | treet)   | (Town/City)                             | (State)  | (Zip Code)   |
| (603) 228.1498<br>(Telephone)                                 | 3 (  | )(Fax)                                  |  | Demers@Demers-Blaisdell.com                          |
| reportable expense to   | ransactions which are                          | not attributable t                      | ts for each client, OR you mate any one client).  the reporting date relative to the |  |
|   | (Full Name of Client as                        | it appears on the Lo                    | bbyist Registration Form)  |  |
| OR ☐ All reportable transunrelated to any particular.         | sactions by the lobbyist outlar client.        | (including the lob                      | byist's family), or the lobbying   | firm listed below which are                          |
| IV. Date of Report Reports cover: activ                       | April 25, 2018   ity from date of registration | on to 3/31/18                           | July 25, 2018  |  |
|   | October 31, 2018 activity from 7/1/18 to 9/3   | 0/18                                    | January 30, 2019 <b>3</b> activity from 10/1/18 to 12/31/                            | 78   |
| V. There have been If this box is checked, Concord, NH 03301. | no fees received and complete just this form a | I no reportable<br>and submit it to the | transactions made since the Secretary of State's Office, St                          | ne last report.   \[ \text{date House, Room 204,} \] |
| VI. Check if addition   | al reports are attached                        | •                                       |  |  |
| If you have receive   | ed fees or made expendi                        | tures, you must fi                      | le Addendum A- Fees and Ex   | penses   |
| ☐ If you have paid as Expense Reimburseme                     | n honorarium or reimbu<br>ent                  | rsed expenses, you                      | u must file <b>Addendum B</b> – Rep  | ort of Honorariums or                                |
| If you, your firm,  | or your family has made                        | political contribu                      | ntions, you must file Addendur   | n C- Political Contributions                         |
| I have read RSA 15, R   | st of my knowledge and                         | belief.                                 | reby swear or affirm that the form $\frac{1}{2}\sqrt{2}$                             | •  |
| (Print Name of lobby)   |  |   |  |  |

# L E A S E P R I N

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## STATE OF NEW HAMPSHIRE



I. Name of Lobbyist(s)

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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JAN 24 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

| (Name of partnership, firm or corporation)  II. Name of Client NH SPEECH (ANGUAGE HEARING AS.  | Soc. Date 1/20/19                  |
|--|------------------------------------|
|  |                                    |
| V. Fees Received   |                                    |
| ndicate the gross amount of all fees received from the client identified about the cli |                                    |
| o lobbying, including fees for services such as public advocacy, governmencluding research, monitoring legislation, and related legal work. The geduced by any expenses:   |                                    |
| ) Total of all fees received in this reporting period  | a)\$                               |
| Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar  | year) \$ 6,000.00                  |
| ) Total of all fees received to date (Add lines a and b)   | 0)8 6,000.00                       |
| ) Indicate the amount of any such fees that are due, but have not yet been paid  | d) \$                              |
| 7. Expenses:   |                                    |
| .obbyist(s)/Lobbying partnerships, firms, or corporations are required to r  | report all expenses made from lobb |

James Demers, Bob Blaisdell, Tom Prasol

II. Name of lobbyist's partnership, firm or corporation, if any:

| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. | a) \$ |
|---|-------|
| b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.   | b) \$ |
| c) Total of all itemized expenditures reported in detail in section VI.   | c) \$ |

contributions will be reported on separate addendums and should not be reported on Addendum A.

during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political

| d) Total expenses for this reporting period (Add lines a, b and c)   | d) \$                             |  |
|--|-----------------------------------|--|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$ <sup>5</sup>                |  |
| f) Total of all expenses year to date  | f) \$                             |  |
| VI. Other Expenses:  Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.    |                                   |  |
| Paid to:   | Amount:                           |  |
|  | \$                                |  |
|  | \$                                |  |
|  |                                   |  |
|  | \$<br>\$                          |  |
|  |                                   |  |
|  | \$                                |  |
|  | \$                                |  |
|  |                                   |  |
|  |                                   |  |
|  | •                                 |  |
| Sworn Statement/Affirmation by Lobbyist  |                                   |  |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm  | m that the foregoing information  |  |
| is true and complete to the best of my knowledge and belief.   | in that the folegoing information |  |
|  | 1. 1                              |  |
| M. Domen   | 1/20/19                           |  |
| (Signature of lobbyjet)  James M. Dewers   | (Date)                            |  |
| James M. Dewers  |                                   |  |
| (Print Name of lobbyist)   |                                   |  |